PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN
			(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3 Ominus 20=		• 10			X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS			Cf minus 3 =		' /			X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	ı	TOTAL		OR	TOTAL	970
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
<u>8</u>	6.01	(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.30	Minus	• 3	0	= ()		X\$ 9=		OR	X\$18=	
	Independent	NITATION OF M	Minus			-		X40=		OR	X80=	\bigvee
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	7
2	.2405		10011.1 24.1									
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL , FEE
	Total	.30	Minus	ح. ۳	0	= /) .		X\$ 9=		OR	X\$18=	
AME	Independent	* ~	Minus	*** A	CLAMA	=		X40=		OR	X80=	V
	ring i rhese	NIAHON OF MI	JENPLE DEN	CIADEIAI	CLAIM		4	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)										ı	ADDIT. FEET	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	AUTATION OF M	Minus	***	CL AINA	-		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	TOTAL	
""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE												
	ine righestivum	wei Fiewiuusiy Pa	recontrousion	winehaug	en/13 11 18	angræsi numbe	s/ 1 UU l	יים או שוט מאף	opiale DOX		iuitii t.	,